MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION P.O. BOX 840
JEFFERSON CITY, MO 65105-0840
ANNUAL 25% EEDP
RECONCILIATION RETURN —

(573) 751-2836 TDD (800) 735-2966

**ADRE** 

53-E25

• DO NOT WRITE IN SHADED AREA
-------------------------------

MISSOURI TAX ACCOUNT NUMBER:

(DEV 44 0004)						
(REV. 11-2004)						

25 PERCENT REC	OVERED MA	TER	IAL	,					
OWNER'S NAME			REPORTING PER	RIOD	ADDRESS CORRECT	TION!			_
DUOINEGO NAME			EEDEDAL IDEAL	IEIOATION NI IMPER	→ □ MAILING ADDRESS □ BUSINESS LOCATION				
BUSINESS NAME			FEDERAL IDENTIFICATION NUMBER		BUSINESS PHO			Check here if	$\dot{-}$
MAILING ADDRESS			TELEPHONE NUMBER			AVE NOWBEN.		phone # chang	jed
			( )					'	╗
CITY			STATE	ZIP	DUE DATE: Ja	anuary 31, 2	2005		
IMPORTANT: THIS RETURN MUST B	E EII EN EOD THE	DEDO	DTING DEDIOD	INDICATED EVEN TO	TOUGH VOU HAVE	NO CDOSS DECI	IDTC/TAY	Y TO DEDOD	_
				AD ILICTMENTS	1				
BUSINESS LOCATION	CODE	GRO	SS RECEIPTS	(INDICATE + OR —)	TAXABLE SAL	ES RATE (%)	AMOU	JNT OF TAX	
									П
									_
									_
									$\dashv$
									_
PAGE 1 TOTALS									
PAGE TOTALS									
TOTALS (ALL PAGES)							1.		
Instructions are updated a	annually and are p	rovide	d on our web s	ite at	SUBTRACT: 2% T	IMFLY PAYMENT	2.		
www.dor.mo.	gov/tax/business	s/sales	/forms/.		ALLOWANCE (if A		-		
FINAL RETURN: If this is your final return	, enter the close d	ate bel	ow and check t	he reason for closing	TOTAL 04150 TA	V DUE	3.		
your account. The Sales Tax law requires		g or dis	continuing busi	ness to make a final	TOTAL SALES TA: ADD: INTEREST F		4.		$\dashv$
sales tax return within fifteen (15) days of th	ne sale or closing.					ne 4 of Instructions)	+		
Date Business Closed:							5.		
☐ Out of Business ☐ Sold Business ☐ Leased Business					ADD: ADDITIONS	TO TAX	<b>+</b> 6.		$\dashv$
SIGN AND DATE RETURN: This must be signed and dated by the taxpayer of			taxpayer or by	the taxpayer's autho-	SUBTRACT: APPF	ROVED CREDIT	- -		
rized agent. Mail to: Missouri Department of Revenue, P.O. Box 840, Jefferson City, MO 65105-0840.				PAY THIS AMOUN		7.		$\neg$	
I have direct control, supervision, or responsibili		and pa	yment of the tax	due. Under penalties of	(U.S. Funds Only)	<u> </u>	=		
perjury, I declare that this is a true, accurate, and I ATTEST THAT I HAVE NO GROSS REC		T FOR	LOCATIONS I	FFT RI ANK					
SIGNATURE OF TAXPAYER OR AGENT	10 10 11 011	011		LE					-
DATE SIGNED			TA	X PERIOD (MMDDCCYY)	THRU (MMDDCCYY)				-

# ANNUAL EEDP RECONCILIATION WORKSHEET FOR 25% RECOVERED

MATERIAL ELECTRICAL EXEMPTION FOR MANUFACTURING			Page 2
ADDRESS CORRECTION REQUIRED	REPORTING PERIOD:	01/01/2004 to 12/3	
1. Missouri Tax ID	DUE DATE:	01/31/2005	
	1		
Telephone Number			
Business Name			
Owner Name			
THIS MUST BE ATTACHED TO YOUR ANNUAL EE	EDP RECONCILIATION	ON RETURN	
PART A — RECOVERED MATERIALS			
1. DESCRIPTION OF PROCESSING WHICH CONTAINS AT LEAST 25 PERCEI	NT RECOVERED MATERIA	LS:	
(ATTACH ADDITIONAL LIST IF NEEDED)			
2. PRODUCT OR PRODUCTS PRODUCED			

	PAGE 3
PART B — EQUIPMENT LISTING	
SECTION 1. TAXABLE EQUIPMENT LISTING (ATTACH ADDITIONAL LIST IF NEEDED)	
List all taxable equipment, special metered or not, which can include all electricity for air conditioners, lights, refrigerators, heaters, other appliances and machines used in	maintenance of

DESCRIPTION OF EQUIPMENT	WATTAGE RATING	TIMES (X) ESTIMATED HOURS NORMALLY USED ANNUALLY	EQUALS (=) WATT HOURS
	I	TOTAL WATT HOURS	

# SECTION 2. EXEMPT EQUIPMENT LISTING (ATTACH ADDITIONAL LIST IF NEEDED)

List exempt equipment, special metered or not, which includes equipment directly used in the manufacturing of the product.

DESCRIPTION OF EQUIPMENT	WATTAGE RATING	TIMES (X) ESTIMATED HOURS NORMALLY USED ANNUALLY	EQUALS (=) WATT HOURS
		TOTAL WATT HOURS	

TOTAL EXEMPT KWH (Total Exempt Watt Hours ÷ 1,000 = TOTAL KWH) Enter in Section 3, Line C.

SECTION 3. COMPUTATION OF PERCENTAGE OF ELECTRICITY USED							
ESTIMATED USAGE		KWH	PERCENTAGE				
A. TOTAL ELECTRICITY USED (taken from suppliers bills)	А		100%				
B. TAXABLE ELECTRICITY USED	В	(PART B, SECTION 1)	(B÷A)				
C. EXEMPT ELECTRICITY USED	С	(A–B)	(C÷A)				

## PART C — SUPPLIERS' BILLINGS

### SECTION 1. DETERMINATION OF EXEMPT AND TAXABLE PURCHASES

Column 1 is from suppliers billings.

- Column 2 is obtained by multiplying Column 1 by the exempt percentage in Part B, Section 3.
- Column 3 is obtained by multiplying Column 1 by the taxable percentage in Part B, Section 3.
- Column 4 is obtained from previously filed sales tax returns.

Column 5 is obtained by subtracting Column 4 from Column 3

AUDITED PERIOD BY MONTH	1. TOTAL BILLING EXCLUSIVE OF SALES TAX	2. BILLING PORTION FOR EXEMPT EQUIPMENT	3. BILLING PORTION ON WHICH SALES TAX IS DUE TAXABLE EQUIP.	4. TAXABLE AMOUNT PREVIOUSLY REPORTED	5. TAXABLE BALANCE TO BE REPORTED ON PAGE 1		
JANUARY							
FEBRUARY							
MARCH							
APRIL							
MAY							
JUNE							
JULY							
AUGUST							
SEPTEMBER							
OCTOBER							
NOVEMBER							
DECEMBER							
TOTAL	\$	\$	\$	\$	\$		
PART D – MANUFACTURER'S DECLARATION OF RECOVERED MATERIAL CONTENT							

List all raw material suppliers and percentage of recovered material content pecessary to qualify for the exemption

	Α	В	С	n	E
Name of Raw Material Supplier	Description of Raw Material	Total Weight or Volume (1)		(B*C) Weight or Volume of Recovered Materials	% Recovered Materials in Total Raw Materials (3)
TOTAL					%
Check Figure: Total of Column Dottotal for Column E.		nis number should	equal the	CHECK FIGURE	%

- (1) You can use either the weight of the materials or the volume of the materials. In either case, you must use the same unit of measure (pounds, ounces, feet or inches).
- (2) This represents the percent of recovered materials in the raw materials. Your supplier may be able to provide you with this information.
- (3) Divide amounts in Column D by the total of Column B.

Attach additional list if needed.

The calculation in Part D determines if you qualify for this exemption for the next calendar year. If you do not qualify, it is your responsibility to notify your utility provider, withdraw your exemption, and remit the appropriate tax to the state. Under penalties of perjury, I declare that I have direct control, supervision or responsibility for completing this application.

SIGNATURE	TITLE	DATE